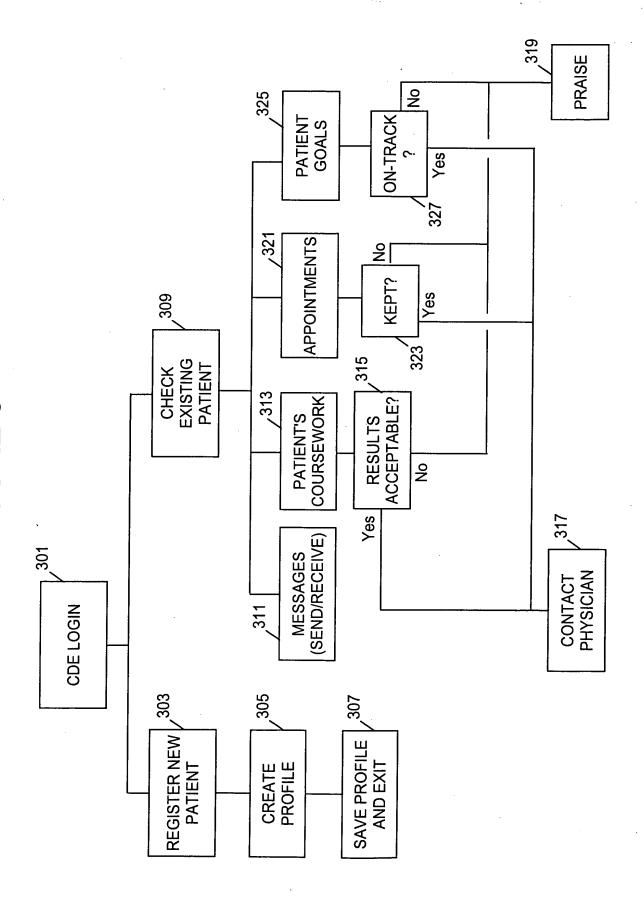


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SIGN^{IN} PASSWORD Submit GOOD CARE COSYTICS OFFICE DIABETES

FIG. 7A

Ralf Ackermann
Personal Scorecard
Physician
Geoffrey Gates, MD
Diabetes Control
A1c 7.5 %
Next Appointment
04/20/01
NovoTrack Progress
37 of 35-topics
completed
Message Center - 0

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FAQS | Glossary | Credits | Legsi | Home

TRACK

1 2 3 4 5 6 7

GUIDETO GOOD CARE

Welcome to NovoTrack - your program to good diabetes care! This program was designed for you. You will find what you need to know about diabetes in the Guide to Good Care, Personal Scorecard and Message Center.

Guide to Good Care is a course in 7 tracks with 35 topics that were chosen to fit you and your diabetes. We recommend that you start at the beginning, but you can start anywhere and complete the topics in any order. Remember to answer the questions after reading each topic. You can reach the course by selecting a numbered button at the top of this page.

Personal Scorecard gives you access to vital information about your diabetes from your primary care provider. Explanations of each test help you to understand where you are now and where you should be going to reach the goals of good diabetes care. The Personal Scorecard can be reached from this homepage on the right or from the BioBox on the left of each page.

Message Center is a secure way to send messages to a nurse in your physicians office who can find answers to your questions about diabetes. The nurse will be following your progress through the Guide to Good Care. Remember that you and your physician make all the decisions about your individual medical care. Message Center can be reached from this homepage on the right or from the BioBox on the left of each page.

You can reach this homepage at any time by clicking on "NovoTrack" in the upper left corner or the "Home" menu item at the top of each page.

Now you are ready to get your diabetes on track - NovoTrack!

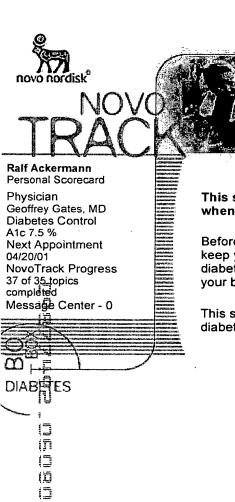
PERSONAL SCORECARD

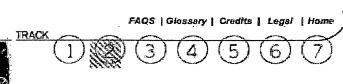
Get instant access to vital info about your diabetes from your primary care provider.

MESSAGE CENTER

Post a message to a CDE who can answer your questions about diabetes.

FIG. 7B





TRACK 2 HAT IS WHAT DIABETES?

This section explains how your body works and what happened when you got diabetes.

Before you had diabetes, your body automatically made adjustments to keep your blood glucose at just the right level. Now that you have diabetes, you have to think about it. You have to make decisions that your body once made for you.

This section will tell you how your body worked before you had diabetes and how it works now.

NEXT



Before You Had Diabetes

What Causes Diabetes

Effects of Diabetes

Who Gets Diabetes



FIG. 7C

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TRAC

Ralf Ackermann
Personal Scorecard

Physician
Geoffrey Gates, MD
Diabetes Control
A1c 7.5 %
Next Appointment
04/20/01
NovoTrack Progress
38 of 35 topics
completed
Message Center - 0

DIAB情ES

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FAQS | Glossary | Credits | Legal | Home

1 3 4 5 6 7

FIG. 7D(1)

TRACK?)
WHATDIABETES?

Effects of Diabetes

A Healthy Life

People with diabetes can live long and active lives. Knowing how to treat your diabetes can help you avoid the symptoms of high and low blood glucose. Maintaining good diabetes control over time reduces the risk of long term complications.

No one would want to have diabetes, but those who rise to the challenge of good diabetes care may find strengths that they never knew they had.

High Blood Glucose

Both high and low blood glucose can cause symptoms that go away after the blood glucose returns to an acceptable level. In rare circumstances, extremes of either high or low blood glucose can lead to coma with results that may not be easy to reverse.

The symptoms of a very high blood glucose are thirst, excessive urination, fatigue, weakness and loss of weight. Other symptoms can occur including blurring of vision and difficulty healing wounds or fighting infections.

When your blood glucose is very high, the body can flush some of the excess blood glucose out of your system by putting it into the urine. You get thirsty as your body loses more and more water in the sugary urine. Frequent trips to the toilet can disturb sleep and interrupt activities during the day.

If a high blood glucose is left untreated, you can begin to lose weight. The weight you lose is not a healthy weight loss. Even though the blood glucose is high, the glucose can't get into the cells so the cells don't get the energy they need to do their work. Muscle is being broken down to make even more glucose. This results in weakness and fatigue.

At a certain level of blood glucose, the brain cannot function well. The most severe consequences of an extremely high blood glucose are confusion and eventually coma. These complications can be prevented by the most basic diabetes care.

Low Blood Glucose

Low blood glucose is usually the result of treatment that is not matched to a person's needs. This topic is covered extensively in Section 2 Using Medications Wisely.

Long-Term Complications

The complications of diabetes are not inevitable. High blood glucose can damage many different organs in your body. How diabetes damages an organ is complex and not completely understood even by scientists who study these problems. It has been shown by a number of studies that maintaining good control of blood glucose reduces the risk of complications. Control of other risks such as high blood pressure and cholesterol can also reduce the risk of complications.



People can live long and healthy lives with diabetes.



Thirst, excessive urination and other symptoms of diabetes do not occur until the blood glucose levels ar extremely high.



Loss of vision (and other long term complications) can be prevented by good diabetes care.



Weight loss because of

Each of the major complications of diabetes is discussed at greater length in Track 6 Complications.

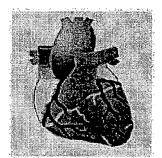
Heart Disease

You may not think of a heart attack as a complication of diabetes - but it is! People with diabetes are at greater risk of diseases caused by cholesterol that builds up and blocks vital arteries. People without diabetes can get blockage in an artery leading to a heart attack, stroke or other circulatory complication. Diabetes just makes all of these complications worse.

Fortunately, various treatments have been shown to reduce the risk of heart disease and other circulatory problems for people with diabetes. You can learn more about this subject in Track 4 Treating High Blood Pressure and Treating High Cholesterol and in Track 6 Heart Disease.

Go To Questions

high blood glucose is not healthy. A large part of the weight loss is muscle - with weakness and fatigue as a result.



Diabetes increases the risk of heart disease. Good diabetes care reduces the risk.

SEE HOW IT WORKS!

FIG. 7D(a)



FAQS | Glossary | Credits | Legal | Home TRACK Ralf Ackermann Personal Scorecard Physician 💲 Frequent urination is always a symptom of diabetes. Geoffrey Gates, MD Diabetes Control A1c 7.5 % C True **Next Appointment** C False 04/20/01 NovoTrack Progress 38 of 35 topics completed Message Center - 0 Back to Track 2.3 NEXT IG. 7E 1=

NOVO

Checkpoint

Ralf Ackermann
Personal Scorecard
Physician
Geoffrey Gates, MD
Diabetes Control
A1c 7.5 %
Next Appointment
04/20/01
NovoTrack Progress
37 of 35 topics
completed
Message Center - 0

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FAQS | Glossary | Credits | Legal | Hame | TRACK | 2 3 4 5 6 7

PERSONAL SCORECARD

How Am I Doing?

This is a good question to ask. Your personal scorecard helps you to answer this question.

Each of the test results to the right of this page has been selected with a purpose. Click on the test result to see an explanation of the test and its significance to your health.

Each test predicts the risk of one or more of the long-term complications of diabetes. For each test, treatment that moves the value toward the recommended goal is beneficial.

Not everyone can achieve the goals set by the American Diabetes Association and others. For some, these recommendations are not appropriate due to other medical concerns. You and your healthcare provider will need to decide goals that are appropriate for you. You can record these values by clicking the Personal Diabetes Goals at the bottom of the column to your right.

FIG. 7F

Personal Care

Personal Goals

Blood Glucose Testing Average 7 per week

Laboratory Tests

Diabetes Control A1c 7.5%

Kidney Health Urine albumin 532

Cholesterol Profile
Total cholesterol - 211
HDL cholesterol - 40
LDL cholesterol - 110
Triglycerides - 346

Physical Examination

Weight/BMI 150 lbs/32

Blood Pressure 160/100

Foot Sensitivity sensitive

Eye Examination

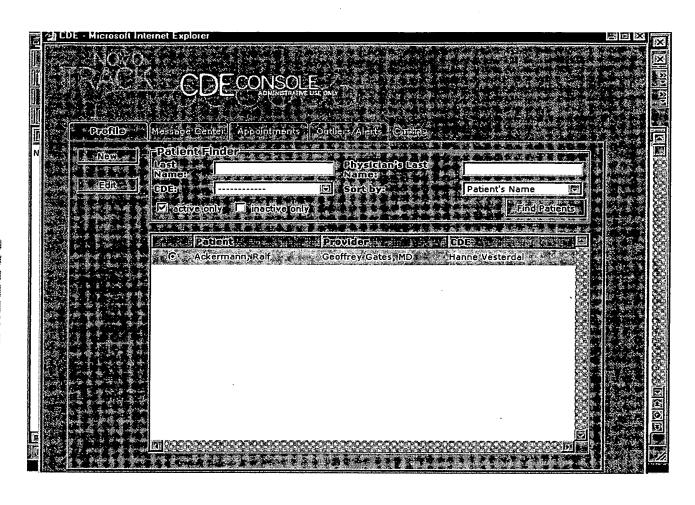


FIG. 7G

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| First Name: Re | lf | La | st Name: Ackerman | n | | |
| Address: | | | | | 120 | |
| City: | | State; | Zip Code: | | | |
| Phone: | | | Pnovo.dk | | | |
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FIG. 7H

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| Type of Diabetes: Type 2 Gender: Male Age: 41 Height: 178 Foot Care: High Risk T Neuropthy: Absent | |
| Nephropathy: Present F Heart Disease: Present | |
| Retinopathy: Absent | |
| Results Date Goal Blood Sugar Goals | : \$ |
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| edit Total Cholesterol 211 10/1/01 180 edit Before Breakfast (mg/dt) 100-150 | |
| edit HDL (mg/dL) 40 12/13/01 40 edit (mg/dL) 80-140 edit LDL (mg/dL) 110 10/10/00 100 edit 2 hours after eating less than | |
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| Teur Poor Sensitivity Sensitive 10/10/00 3ensitive | |
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FIG. 7I

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| fatalistic | e complication | n 5 | | 100 | | |
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| 4. Frequency of Blood Su | igar Monitorin | g | | | 1.0 | |
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| 5. Attitude Toward Smok | mark - mark market and a second | | | | - | |
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FIG.7J

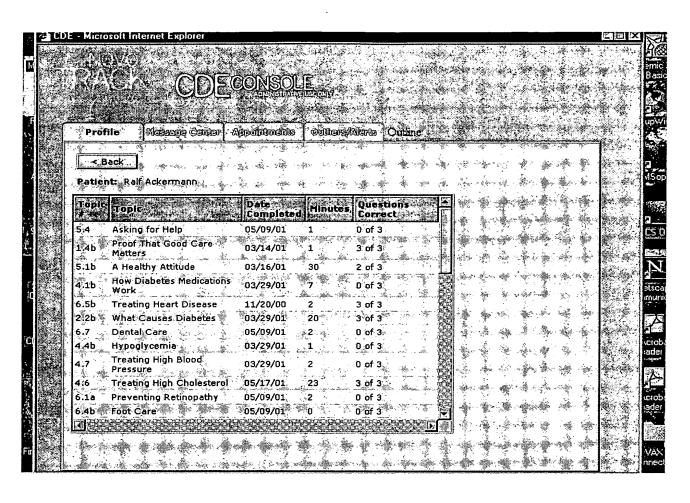


FIG. 7K

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| Physician | |
| Physician | |
| Date of last Physician Appointment: | 10/10/00 |
| Next Physician Appointment Goal: | 4/20/01 |
| Actual Physician Appointment: | 4/20/01 |
| *NOTE: Dates must be entered in the following format: m/d/yy o | r mm/dd/yyyy |
| | |
| Ophthalmologist | |
| | |
| Date of last Ophthalmologist Appointment: Next Ophthalmologist Appointment Goal: | 1/4/00 |
| | 1/4/01 |
| Actual Ophthalmologist Appointment: *NOTE: Dates must be entered in the following format: m/d/yy or | 10/25/01 |
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FIG. 7L

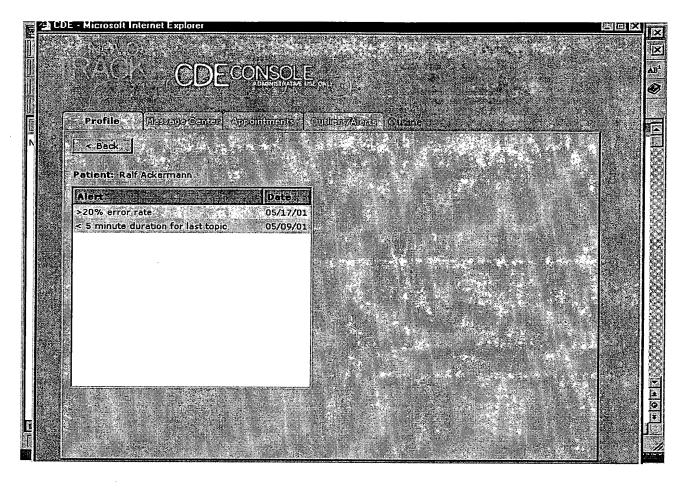


FIG.7M

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FIG. 7N

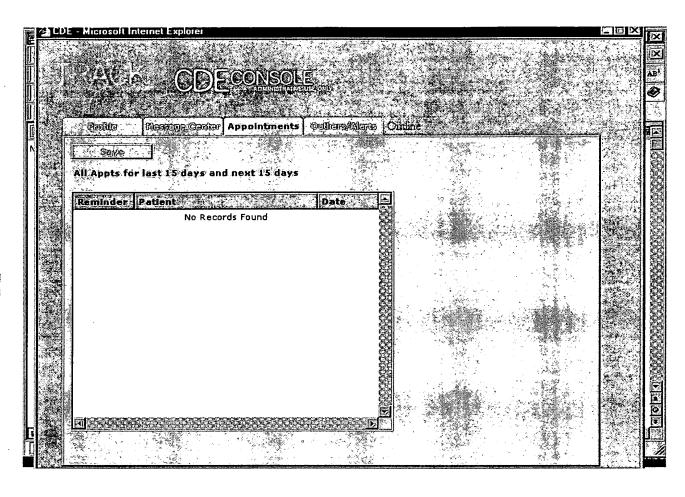


FIG. 70

| CDE - Microsoft Internet Explorer | |
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FIG. 7P

FIG. 8A

NovoTrack Guide To Good Care Outline

Key

O.0e Title of the Topic Medical Record Data Patient Attitude Data Questions

Numbering sequence is by track, then topic. Note that a letter after the number indicates a choice of article for that topic depending on patient characteristics entereed by the patient in response to questions at the time of registration. Both the CDE and pateint can edit data if required.

<u>Track 1 - Getting Good Care</u> (4 articles: This section has 1 **Medical Record** choice and 1 **Patient Attitude** response at registration to choose persepctive for the articles.)

| 1.1 Defining Quality Care. | Questions Questions |
|--|---------------------------------|
| 1.2a Caring for Yourself | New Diagnosis Questions |
| 1.2b Caring for Yourself | Established Patterns/ Questions |
| 1.3 Your Diabetes Care Team | Questions |
| 1.4a <u>Proof that Good Care</u> <u>Matters</u> | Type 1 Questions |
| 1.4b Proof that Good Care Matters | Type:2 Questions |

<u>Track 2 - What is Diabetes</u> (4 articles: This section has 1 **Medical Record** choice at registration to choose persepctive for the articles.)

| 2.1 <u>Before You Had Diabetes</u> | Questions |
|------------------------------------|-------------------|
| 2.2a What Causes Diabetes | Type 1 Questions |
| 2.2b What Causes Diabetes | Type 2 Questions |
| 2.3a Effects of Diabetes | Type 1: Questions |
| 2.3b Effects of Diabetes | Type 2 Questions |
| 2.4a Who Gets Diabetes | Type 1 Questions |
| 2.4b Who Gets Diabetes | Type 2 Questions |

<u>Track 3 - Healthy Eating & Exercise</u> (2 articles: This section has 2 **Medical Record** choices and 1 **Patient Attitude** response at registration to choose persepctive for the articles.)

| 3.1a Healthy Eating | Type 1 | | Questions |
|----------------------------|--------------------|-----------|------------------|
| 3.1b <u>Healthy Eating</u> | Type 2 BMI < 28 | | <u>Questions</u> |
| 3.1c. Healthy Eating | Type 2 BMI > 28 | | Questions |
| 3.2a Healthy Exercise | Type 1 | Sedentary | Questions |
| 3.2b. Healthy Exercise | Type 1 | Active | Questions |
| 3.2c Healthy Exercise | Type 1 | Disabled | Questions |
| 3.2d Healthy Exercise | Type 2 | Sedentary | Questions |
| 3.2e Healthy Exercise | Type 2 | Active | Questions |
| 3.2f Healthy Exercise | Type 2 | Disabled | Questions |

<u>Track 4 - Using Medications Wisely</u> (8 articles: This section has 1 **Medical Record** choice and 2 **Patient Attitude** responses at registration to choose persepctive for the articles.)

FIG. 8B

| 4.1a | Choosing The Right | Type 1 | Borne and Section 1 | Questions |
|-------|---------------------------------|------------|-----------------------|------------------|
| 4.1b | How Diabetes Medications Work | Type 2 | | Questions |
| 4.2a | Intensive Insulin Therapy | Type 1 | | Questions |
| 4.2b | Combinations Of Medications | Type 2 | | Questions |
| 4.3a | Practical Tips For Insulin | Type 1 | | Questions |
| 4.3b | Insulin For Your Diabetes | Type 2 | Accepts Injections | Questions |
| 4.3c | Insulin For Your Diabetes | Type 2 | Rejects Injections | Questions |
| 4.4a | Hypolqlycemia // | Type 1 '', | | Questions |
| 4.4b | Hypolglycemia | Type 2 | | Questions |
| 4.5a | Monitoring Your Blood Sugar | :Type 1 | Infrequent Monitoring | <u>Questións</u> |
| 4.5b | Monitoring Your Blood Sugar | Type 1 | Frequent Monitoring | Questions |
| 4.5c | Monitoring Your Blood Sugar | Type 2 | Infrequent Monitoring | Questions |
| -4.5d | Monitoring Your Blood Sugar | Type 2 | Frequent Monitoring | Questions |
| 4.6 | Treating High Cholesterol | | | Questions |
| 4.7 | Treating High Blood Pressure | | | Questions |
| 4.8 | Benefits of Asprin | | | Questions |

<u>Track 5 - Family, Friends & Feelings</u> (4 articles: This section has 1 **Patient Attitude** response at registration to choose persepctive for the articles.)

| 5.1a A Healthy Attitude | Optimistic | Questions |
|-------------------------|-------------|------------------|
| 5.1b A Healthy Attitude | Balanced | Questions |
| 5.1c A Healthy Attitude | Pessimistic | Questions |
| 5.2 Setting Goals | | Questions |
| 5.3 Family & Friends | | <u>Questions</u> |
| 5.4 Getting Help | | Questions |

<u>Track 6 - Complications</u> (7 articles: This section has 5 **Medical Record** choices and 1 **Patient Attitude** response at registration to choose persepctive for the articles.)

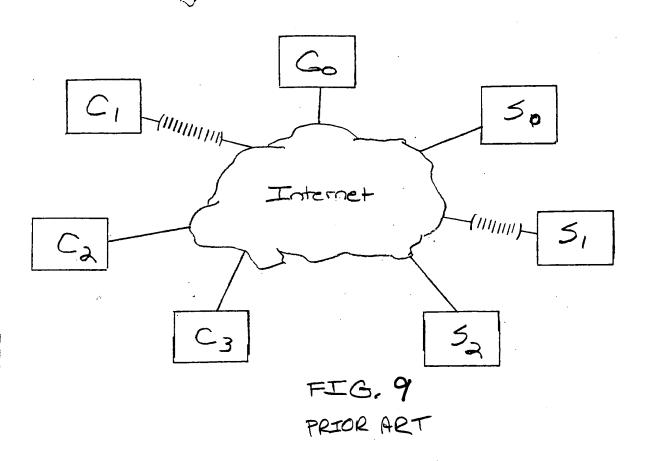
| 6.1a Preventing Retinopathy | Complication Absent | Questions |
|-------------------------------|------------------------|-----------|
| 6.1b Treating Retinopathy | Complication Present | Questions |
| 6.2a Preventing Neuropathy | Complication Absent | Questions |
| 6.2b Treating Neuropathy | Complication Present | Questions |
| 6.3a Preventing Nephropathy | Complication Absent | Questions |
| 6.3b Treating Nephropathy | Complication Present | Questions |
| 6:4a Foot Care | Low Risk | Questions |
| 6.4b Foot Care | High Risk | Questions |
| 6.5a Preventing Heart Disease | No Ischemia | Questions |
| 6.5b Treating Heart Disease | Prior/Current Ischemia | Questions |

FIG. BC

| 6.6a Smoking | Nonsmoker | <u>Questions</u> |
|---------------------|---------------------------------|------------------|
| 6.6b <u>Smoking</u> | Smokes - Wants to quit | <u>Questions</u> |
| 6.6c Smoking | Smokes - Doesnt want to quit | Questions |
| 6:7 Dental Care | | Questions |

<u>Track 7 - Special Situations</u> (5 articles: This section has 3 **Medical Record** choices at registration to choose persepctive for the articles.)

| 7.1a Driving | Type 1 | Questions |
|------------------------|------------------------|------------------|
| 7.1b Driving | Type 2 | Questions |
| 7.2a. Traveling | Type 1: | Questions |
| 7.2b Traveling | Type 2 | Questions |
| 7.3a Employment | < 62 years old | Questions |
| 7.3b Retirement | > 62 years old | <u>Questions</u> |
| 7.4a Insurance | < 62 years old | Questions |
| 7.4b. Medicare | > 62 years old | Questions |
| 7.5a Men's Sexuality | Male | Questions · |
| 7.5b Women's Sexuality | Female, < 45 years old | <u>Questions</u> |
| 7.5c Women's Sexuality | Female, > 45 years old | Questions |
| 7.6a Sick Days | Type 1 | Questions |
| 7.6h Sick Dave | Type 2 | Questions |



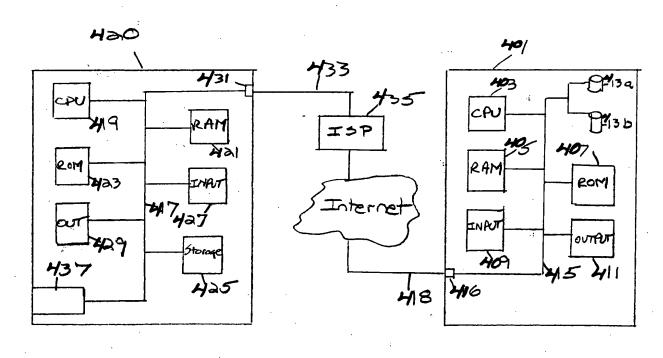


FIG. 10 PRIOR ART